

Wyoming Senior Services Board

Project Service Survey (38 centers responding)

August 20, 2009

1. Please enter the name and address of your organization and the person who is completing this survey:

South Big Horn Senior Citizens, Inc. 417 South 2nd St. Greybull, WY 82426 Laurie Royal/Executive Director

2. In addition to your primary site, how many other sites do you have?

none

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Caregiver Services

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Forms Assistance

Health Screening

Home Delivered Meals

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Ombudsman Advocacy

Personal Care

Personal Emergency Response Systems

Respite

Socialization

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

TINA SAUNDERS RIVERTON SENIOR CENTER 303 E LINCOLN AVE RIVERTON, WY 82501

2. In addition to your primary site, how many other sites do you have?

1

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Congregate Meals

Exercise

Health Screening

Hearing Screening

Home Delivered Meals

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Nutrition Screening

Personal Emergency Response Systems

Retired Senior Volunteer Services

Socialization

Tax Return Assistance

Transportation

Vision Screening

1. Please enter the name and address of your organization and the person who is completing this survey:

Wayne Clements Central Wyoming Senior Services Casper, WY 82601

2. In addition to your primary site, how many other sites do you have?

Two

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Adult Day Care/Adult Day Services

Assistance Hotlines

Caregiver Services

Case Management

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Care

Personal Emergency Response Systems

Respite

Retired Senior Volunteer Services

Socialization

Stress Management

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Cheyenne Housing Authority, Kim Maes

2. In addition to your primary site, how many other sites do you have?

4

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Assistive Technology

Caregiver Services

Case Management

Chore Services

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Modification

Homemaker Services

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Care

Respite

Retired Senior Volunteer Services

Skilled Nursing

Socialization

Stress Management

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Douglas Senior Citizens, Inc. 532 S. 6th Street Douglas, WY 82633 Teresa Norris

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Adult Day Care/Adult Day Services

Assisted Transportation

Caregiver Services

Case Management

Chore Services

Congregate Meals

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Home Modification

Homemaker Services

Information and Referral

Library and Book Loan

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Personal Care

Personal Emergency Response Systems

Respite

Retired Senior Volunteer Services

Socialization

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Hot Springs County Senior Citizens Center, Inc. 206 Senior Avenue Thermopolis, WY 82443 Janet Dickeson

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Caregiver Services

Case Management

Chore Services

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Nutrition Screening

Personal Emergency Response Systems

Socialization

Stress Management

Support Groups

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Thayne Senior Center PO Box 298 Thayne WY 83127 James R. Bagshaw

2. In addition to your primary site, how many other sites do you have?

1

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Assistive Technology

Computer Access

Congregate Meals

Elder Abuse/Prevention

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Emergency Response Systems

Socialization

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Golden Hour Senior Center 550 Uinta Drive, Ste. A, Green River, WY

2. In addition to your primary site, how many other sites do you have?

none

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Computer Access

Congregate Meals

Education and Training

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Library and Book Loan

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Retired Senior Volunteer Services

Socialization

Tax Return Assistance

1. Please enter the name and address of your organization and the person who is completing this survey:

Star Valley Senior Citizens, Inc dba Salt River Center-540 Washington/PO Box 883, Afton WY 83110

2. In addition to your primary site, how many other sites do you have?

None

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Congregate Meals

Home Delivered Meals

Food inventory Yearly audit Personal - WY Retirement - cash in lieu insurance Equipment for center Local match

1. Please enter the name and address of your organization and the person who is completing this survey:

Powell Senior Center Ago-go PO Box 1156 Powell, WY 82435 Cathy Florian, Director

2. In addition to your primary site, how many other sites do you have?

none

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Congregate Meals

Exercise

Home Delivered Meals

Newsletters

Nutrition Education

1. Please enter the name and address of your organization and the person who is completing this survey:

Eppson Center for Seniors 1560 North Third Laramie WY 82072 Gayle M. Woodsum, Executive Director

2. In addition to your primary site, how many other sites do you have?

Rock River, Wyoming

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assistance Hotlines

Assisted Transportation

Caregiver Services

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Homemaker Services

Immunization Clinics

Information and Referral

Legal Services

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Care

Respite

Skilled Nursing

Socialization

Stress Management

Support Groups

Tax Return Assistance

Transportation
Vision Screening
Outdoor Activities Programs Cultural Events Oral History Project Intergenerational Programs

1. Please enter the name and address of your organization and the person who is completing this survey:

Lander Senior Citizens Center Inc 205 South 10th Lander, WY 82520

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Immunization Clinics

Information and Referral

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Socialization

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Washakie County Senior Citizens Center 300 South 14th Street Worland, Wyoming 82401 Linda McClure

2. In addition to your primary site, how many other sites do you have?

none

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Case Management

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Personal Care

Personal Emergency Response Systems

Socialization

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Ten Sleep Senior Center PO Box 319, Ten Sleep, Wy 82442 Sue Carey, Director

2. In addition to your primary site, how many other sites do you have?

None

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Home Delivered Meals

Homemaker Services

Immunization Clinics

Information and Referral

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Socialization

Tax Return Assistance

Transportation

Foot Care Clinic, monthly

1. Please enter the name and address of your organization and the person who is completing this survey:

Niobrara Senior Center, Inc. Connie Baker, Director

2. In addition to your primary site, how many other sites do you have?

1

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Assistive Technology

Caregiver Services

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Home Modification

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Care

Personal Emergency Response Systems

Respite

Socialization

Stress Management

Support Groups

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Cokeville Senior Citizens Center, Inc. Brenda Lazcanotegui

2. In addition to your primary site, how many other sites do you have?

None

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Congregate Meals

Education and Training

Exercise

Forms Assistance

Home Delivered Meals

Immunization Clinics

Information and Referral

Loan Closets

Low Income Energy Assistance

Nutrition Education

Socialization

1. Please enter the name and address of your organization and the person who is completing this survey:

Campbell County Senior Citizens Assn, Inc 701 Stocktrail Avenue Gillette, Wy 82716 Cathy Konrath-Wardlow Ann Rossi

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Case Management

Chore Services

Congregate Meals

Exercise

Home Delivered Meals

Homemaker Services

Information and Referral

Personal Care

Respite

Skilled Nursing

Socialization

Transportation

Painting Instructor: (Partial Salary)

1. Please enter the name and address of your organization and the person who is completing this survey:

High Country Senior Citizens, Pamela Wyant, Director

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Congregate Meals

Education and Training

Exercise

Home Delivered Meals

Loan Closets

Nutrition Education

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Senior Center of Jackson Hole 830 E. Hansen Ave PO Box 4677 Jackson, Wyoming 83001 Completing Survey:
Becky Zaist, Executive Director

2. In addition to your primary site, how many other sites do you have?

None

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Computer Access

Exercise

Forms Assistance

Newsletters

Nutrition Education

Socialization

WSSB Grant funds were used to hire an Activities Coordinator which enabled us to offer more socialization programs, health exercise programs, computer access and forms assistance.

1. Please enter the name and address of your organization and the person who is completing this survey:

Glenrock Senior Center 615 W. Deer Street P.O. Box 783, Glenrock, WY 82637 Jill Kingston

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Assistive Technology

Caregiver Services

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Home Modification

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Ombudsman Advocacy

Personal Care

Personal Emergency Response Systems

Respite

Socialization

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Young At Heart Senior Center 2400 Reagan Ave Rock Springs Wy 82901 Jeanine Cox, Director

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Caregiver Services

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Home Modification

Homemaker Services

Immunization Clinics

Information and Referral

Legal Services

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Nutrition Screening

Personal Care

Respite

Retired Senior Volunteer Services

Skilled Nursing

Socialization

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Crook County Senior Services, Inc. Marge Myers

2. In addition to your primary site, how many other sites do you have?

2

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Caregiver Services

Case Management

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Home Modification

Homemaker Services

Immunization Clinics

Information and Referral

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Nutrition Screening

Personal Care

Personal Emergency Response Systems

Respite

Socialization

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Cody Council on Aging, Inc. Patti Smith

2. In addition to your primary site, how many other sites do you have?

One - Meeteetse

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Homemaker Services

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Ombudsman Advocacy

Socialization

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Meals On Wheels of Natrona County Jamie Loveall 1760 East 12th Street Casper, WY 82601

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Case Management

Education and Training

Home Delivered Meals

Information and Referral

Nutrition Counseling

Nutrition Education

Nutrition Screening

1. Please enter the name and address of your organization and the person who is completing this survey:

PINE BLUFFS SENIOR CENTER PO BOX 532 PINE BLUFFS WY 82082 NORMA JEAN ANDERSON

2. In addition to your primary site, how many other sites do you have?

NONE

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assistance Hotlines

Assistive Technology

Computer Access

Congregate Meals

Education and Training

Exercise

Forms Assistance

Home Delivered Meals

Homemaker Services

Information and Referral

Library and Book Loan

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Retired Senior Volunteer Services

Socialization

Stress Management

Support Groups

Tax Return Assistance

Transportation

POOL GAMES, CARDS AND OTHER ACTIVITIES

1. Please enter the name and address of your organization and the person who is completing this survey:

Shoshoni Senior Citizen's Lindy Linn, Director PO Box 27 Shoshoni, WY 82649

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assistance Hotlines

Assisted Transportation

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Socialization

Tax Return Assistance

Transportation

Vision Screening

1. Please enter the name and address of your organization and the person who is completing this survey:

Kenneth L. Pasley Services for Seniors, Inc. PO Box 283 Wheatland, WY 82201

2. In addition to your primary site, how many other sites do you have?

3

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Adult Day Care/Adult Day Services

Assistive Technology

Computer Access

Congregate Meals

Education and Training

Exercise

Home Delivered Meals

Home Modification

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Socialization

Tax Return Assistance

Transportation

Cooling of Centers by buying AC Replace rough sidewalks at Guernsey Center Expansion of Nurses Office New
Tables and Chairs for Dining Room Signage

1. Please enter the name and address of your organization and the person who is completing this survey:

Goshen County, Wyoming Senior Friendship Center P.O. Box 517 Torrington, WY 82240 Jeri A. Bottenfield, Director

2. In addition to your primary site, how many other sites do you have?

Four - Lingle, LaGrange, Ft. Laramie, Lingle

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Assistive Technology

Caregiver Services

Case Management

Chore Services

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Homemaker Services

Information and Referral

Legal Services

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Education

Nutrition Screening

Personal Care

Personal Emergency Response Systems

Respite

Socialization

Stress Management

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Uinta Senior Citizens Inc. Sarah Blakeman

2. In addition to your primary site, how many other sites do you have?

one

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Adult Day Care/Adult Day Services

Assisted Transportation

Assistive Technology

Caregiver Services

Case Management

Chore Services

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Hearing Screening

Home Delivered Meals

Home Modification

Homemaker Services

Information and Referral

Library and Book Loan

Loan Closets

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Care

Personal Emergency Response Systems

Respite

Skilled Nursing

Socialization

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

Charlie Simineo Wyoming Senior Citizens, Inc PO Box BD Riverton, WY 82501

2. In addition to your primary site, how many other sites do you have?

3

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assistance Hotlines

Caregiver Services

Case Management

Education and Training

Elder Abuse/Prevention

Forms Assistance

Information and Referral

Ombudsman Advocacy

Respite

Socialization

Support Groups

The Senior Companion Program additionally provides extensive services around socialization with adults in their own home while providing a stipend for the companions who are doing the visits.

1. Please enter the name and address of your organization and the person who is completing this survey:

Southwest Sublette County Pioneers PO Box 33 Big Piney, WY 83113 Karen Taylor Secretary

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Congregate Meals

Home Delivered Meals

Socialization

1. Please enter the name and address of your organization and the person who is completing this survey:

Buffalo Senior Center, Inc. P.O. Box 941, 671 W. Fetterman Buffalo, WY 82834 Bobbie Walseth, Executive Director

2. In addition to your primary site, how many other sites do you have?

1

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Assistive Technology

Caregiver Services

Case Management

Computer Access

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Health Screening

Home Delivered Meals

Homemaker Services

Information and Referral

Library and Book Loan

Loan Closets

Newsletters

Nutrition Education

Nutrition Screening

Personal Care

Respite

Skilled Nursing

Socialization

Stress Management

Support Groups

Tax Return Assistance

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

SeniorCitizens Council 211 Smith Street Sheridan, WY 82801

2. In addition to your primary site, how many other sites do you have?

Six

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Adult Day Care/Adult Day Services

Assisted Transportation

Case Management

Congregate Meals

Elder Abuse/Prevention

Forms Assistance

Home Delivered Meals

Homemaker Services

Information and Referral

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Personal Care

Socialization

Tax Return Assistance

Transportation

Volunteer Program...

1. Please enter the name and address of your organization and the person who is completing this survey:

Meals on Wheels of Cheyenne, Inc. 2015 South Greeley highway, Cheyenne, WY82007 Sharon Benson

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Case Management

Education and Training

Forms Assistance

Home Delivered Meals

Information and Referral

Loan Closets

Nutrition Counseling

Nutrition Education

Nutrition Screening

1. Please enter the name and address of your organization and the person who is completing this survey:

Kemmerer Senior Center 105 J.C. Penney Drive Kemmerer, WY 83101 Roxanne Rudy

2. In addition to your primary site, how many other sites do you have?

none

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Chore Services

Computer Access

Congregate Meals

Exercise

Forms Assistance

Home Delivered Meals

Newsletters

Socialization

Funding allowed personnel wages and fringe for Janitor Part Time Maintenance position Part Time Cook Activity Director Pay for Contract employees Bookkeeper Dietician Home Delivered Supplies Kitchen Equipment Recreational items Travel Raw Food expenses Utilities

1. Please enter the name and address of your organization and the person who is completing this survey:

Rendezvous Pointe P. O. Box 804 Pinedale, WY 82941 P.J. Normand

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Computer Access

Congregate Meals

Exercise

Home Delivered Meals

Socialization

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

North Big Horn Senior Center 757 Great Western Ave. Lovell, Wy. 82431

2. In addition to your primary site, how many other sites do you have?

0

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Congregate Meals

Forms Assistance

Home Delivered Meals

Immunization Clinics

Information and Referral

Legal Services

Library and Book Loan

Loan Closets

Newsletters

Socialization

Transportation

1. Please enter the name and address of your organization and the person who is completing this survey:

WESTON COUNTY SENIOR SERVICES 627 PINE STREET NEWCASTLE, WY 82701

2. In addition to your primary site, how many other sites do you have?

UPTON & OSAGE

3. Please select all services that you have provided to Wyoming's Older Adults that have been paid for, either in whole or in part, by funding allocated to your organization by the Wyoming Senior Services Board during the State Fiscal Years of 2008 and 2009:

Assisted Transportation

Congregate Meals

Education and Training

Elder Abuse/Prevention

Exercise

Forms Assistance

Home Delivered Meals

Immunization Clinics

Information and Referral

Library and Book Loan

Loan Closets

Low Income Energy Assistance

Newsletters

Nutrition Counseling

Nutrition Education

Nutrition Screening

Retired Senior Volunteer Services

Socialization

Tax Return Assistance

Transportation

ALL THAT I MARKED, WE USE OUR WSSB MONEY AS OUR LOCAL MATCH TO OTHER GRANTS. WOULD YOU PLEASE CHECK MY EMAIL. I NEVER RECEIVED THIS UNTIL CONNIE OWENS CALLED ME AND SHE SENT ME THE FORMS THAT SHE HAD RECEIVED FROM MICHELLE THAT WAS THE RESULTS FROM THE SURVEY. I CALLED MARGE MEYERS IN SUNDANCE AND SHE FORWARDED IT TO ME. I AM SORRY IT IS LATE, BUT IT MUST BE HUNG UP SOMEWHERE. MY EMAIL IS glenda@wcscs.us THANKS

Percentage Breakdown

SERVICE	Response Percent	Response Percent
Adult Day Care/Adult Day Services	13.2%	5
Assistance Hotlines	13.2%	5
Assisted Transportation	65.8%	25
Assistive Technology	23.7%	9
Caregiver Services	36.8%	14
Case Management	52.6%	20
Chore Services	36.8%	14
Computer Access	52.6%	20
Congregate Meals	89.5%	34
Education and Training	68.4%	26
Elder Abuse/Prevention	57.9%	22
Exercise	76.3%	29

Forms Assistance	76.3%	29
Glaucoma Screening	0.0%	0
Health Screening	52.6%	20
Hearing Screening	23.7%	9
Home Delivered Meals	89.5%	34
Home Modification	21.1%	8
Homemaker Services	50.0%	19
Immunization Clinics	44.7%	17
Information and Referral	78.9%	30
Legal Services	10.5%	4
Library and Book Loan	57.9%	22
Loan Closets	76.3%	29
Low Income Energy Assistance	47.4%	18

Newsletters	76.3%	29
Nutrition Counseling	50.0%	19
Nutrition Education	81.6%	31
Nutrition Screening	60.5%	23
Ombudsman Advocacy	10.5%	4
Personal Care	39.5%	15
Personal Emergency Response Systems	31.6%	12
Respite	36.8%	14
Retired Senior Volunteer Services	21.1%	8
Skilled Nursing	15.8%	6
Socialization	86.8%	33
Stress Management	21.1%	8
Support Groups	31.6%	12
Tax Return	60.5%	23

Assistance		
Transportation	73.7%	28
Vision Screening	7.9%	3
Other		11
Painting Instructor: (Partial Salary)		
Outdoor Activities Programs		
Cultural Events		
Oral History Project		
Intergenerationa l Programs		
Foot Care Clinic		